

## **II. Needs Assessment**

In application year 2012, Section IIC will be used to provide updates to the Needs Assessment if any updates occurred.

### **C. Needs Assessment Summary**

The Family and Community Health Bureau (FCHB) regards the needs assessment process as an ongoing, bureau-wide activity due to the interest and involvement of state and local partners -- particularly those who contract for MCHBG funding -- in improving MCH in Montana. To continue to build on the 2005 Needs Assessment, an existing Bureau team with membership from all programs in the Bureau was expanded and became the Needs Assessment Team that developed a process for the 2010 needs assessment.

A statewide preliminary planning survey was conducted in the summer of 2008 with MCH partners to solicit feedback regarding previous methodologies, data gaps, and representation. This survey resulted in an initial list of priority needs and recommendations for conducting the needs assessment and an overall suggestion for enhanced public input, greater partner involvement at the state and county level, and a systematic approach to identifying problems and possible solutions.

Montana's needs assessment process included focus groups with priority populations, surveys of public health professionals, and interviews with key informants who had MCH experience. The focus group populations were determined based on a review of data sources. Priority populations were selected, in part, to augment assessment for populations with limited data, including adolescents and parents of Children and Youth with Special Health Care Needs (CYSHCN). A survey of public health professionals, which was conducted in the summer of 2009, identified local organizations serving the MCH population in Montana. Key informant interviews provided in depth data from partners who worked in either a public or private MCH related organization.

The qualitative and quantitative data collected by the FCHB, was presented to the Public Health System Improvement (PHSI) Task Force in Winter/Spring 2010. The PHSI Task Force membership includes representatives of local health departments (one each from large, medium, small, and frontier-sized counties), and representatives from a variety of agencies or associations throughout the state, including the Montana University System, tribal health departments, local boards of health, the Montana Primary Care Association, and the Billings Area Indian Health Service. The Task Force was charged by the Division administrator with the responsibility to assist staff to finalize Montana's 2010-2015 list of MCH priority areas and performance measures.

During the previous needs assessment process, priority areas were developed independent of the performance measures. While all but one of the previous priority areas related to at least one state and national performance measure, they were more directly correlated with objectives in the Bureau's strategic plan. For the 2010 needs assessment process, priority areas were identified simultaneously with performance measures, and the relationship of those priorities to the Bureau and Division strategic plans was also considered. Only areas with an identified measure that were relevant at the state and/or local level were chosen. The 2010 -- 2015 MCH priority areas include: child safety/unintentional injury; access to care, with a focus on children with a special health care need, i.e. cleft lip and/or palate; preconception health; smoking during pregnancy; oral health; Montana's Varicella immunization requirement; and Montana's Diphtheria, Tetanus, and Pertussis immunization requirement.

The next step is the creation of action plans for the priority areas and related state performance measures through a cooperative activity between the state and local contractors. The MCH contracting process requires that local contractors complete a "pre-contract survey" in the spring

of each year, indicating the state or federal performance measure that local efforts will focus on during the contract period. Local contractors are also required to describe evidenced based activities they will employ to address the selected measure. In FFY 2010, local contractors are being asked to provide their selected activities as short, open ended answers on the surveys -- state staff will compile and categorize those responses by level of the pyramid in anticipation of the FFY 2011 pre-contract survey. State staff will research all proposed activities to find sound scientific evidence to support action plans being prepared at the state level. This participatory process allows locals to contribute to the development of action plans for performance measures.

***/2012/***

***The 2010 -- 2015 MCH priority areas remained the same. The creation of the Office of Epidemiology and Scientific Support within the PHSD, has resulted in State Performance Measure 3 being revised to better reflect the state's capacity to implement activities and collect data.***

***Needs Assessment Topic Specific Summaries were created from the 2010 MCH Needs Assessment document and are available at: <http://www.dphhs.mt.gov/PHSD/family-health/mchc/phsd-mch-assessment.shtml>***

***The 2012 Pre-Contract Survey required each health department to develop a SY 2012 Operational Plan for their selected NPM or SPM. The MCHC Health Education Specialist will be working with and providing feedback to the health departments throughout the year on their respective Operational Plans. The 2012 PCS format will be used in subsequent years with the intent to incorporate the results into the 2015 MCH BG Needs Assessment. See the PCS attachment.***

***In 2011, the Primary Care Office (PCO) collected data on the state's practicing medical, dental, and mental healthcare providers which will be used in the 2015 Needs Assessment. The PCO anticipates ongoing updates of this data as funding allows.***

***CSHS is preparing to apply for the 2012 State Implementation grant by conducting a comprehensive CYSHCN needs assessment by December 2011. The CSHS results will be incorporated into the 2015 MCH Needs Assessment.***

***//2012//***

***An attachment is included in this section. IIC - Needs Assessment Summary***